

City Council Work Session Transcript – 10/27/2020

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[9:03:19 AM]

>> Mayor Adler: We're called to order for the city of Austin work session set for today, Tuesday, October 27th, 2020. We have a quorum present. This meeting is being held virtually. Colleagues, we have one briefing today. It's the covid-19 briefing. After that we have pulled a pulled item and it's only one pulled item thus far, item 43. And then we have two items to discuss in executive session. One is Reagan national advertising and the other one is north burnet gateway regulating plan. Hopefully we can be done midday today. Natasha is not feeling well and will be listening. She's online as we've heard. So she's with us, but won't have the camera on.

[9:04:29 AM]

Manager, do you want to take us through the covid briefing?

>> Thank you, mayor, council. We'll start today's work session with a briefing as we always have this year on covid-19. We will hear from director Hayden and from Dr. Escott, and as they get pulled into the panel view I'll just remind that we have been proud of our community to essentially hold the line for the last couple of weeks. But we are watching closely as we see our neighbors to the west see significant increases in cases and their hospital capacity is taking a strain. So we are knowing that we continue to stay vigilant. We need all of our community to continue to practice social distance, wear face coverings, but we'll continue to monitor progress and keep you informed as you move forward. With that I'll pass it over to director Hayden. Director Hayden.

[9:05:41 AM]

>> Good morning, Stephanie Hayden, director Austin public health. I want to start out by talking about our epidemiologist and surveillance team. They are providing additional support to our schools, our higher education, our long-term care and other nursing home sites. We are really working very close we with the schools because what we're seeing at this point is that as the schools continue to open, it's essential for us to provide that additional support to schools. So we are continuing to host a weekly call with the covid-19 point of contacts at the schools. This includes the public and private schools. And we are working on a

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testing strategy for approximately about a thousand by next rapid tests that have been acquired for schools. The initial plan includes title I schools. And title I schools are schools where the majority of the students attend that school, it is a free and/or reduced lunch students that are receiving free and/or reduced lunch meals at that school. And within those title I schools we are looking at the higher positivity rate within that title I community. Texas education agency and the Texas department of emergency management, which is tea and tdem, have began their rapid antigen testing pilot program. As you know there was an

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announcement sent out a couple of weeks ago with some pilot areas that they would like to test. They are making a change this week and as of Wednesday, tomorrow, they are going to open up that process to be available across the state of Texas. School districts, whether you're public, private or charter, will be able to apply to be in the program to have the antigen pilot testing to be available. The results will go through the state health services and then back to the local departments. So, you know, basically what I've described is that tea is going to open up the process a little broader. We are going to move forward with a thousand by next rapid antigen test currently for schools.

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That we will be working with establishing that plan as well. Last week on Friday on the 23rd, we launched our vaccine distribution coalition, and there were over 100 people that attended that meeting and it was very well attended. And we were provided some really good information. It is kind of the first move forward. As we know things are subject to change, but we are providing information as quickly as we can to the group to get everyone involved. We talked about identifying priority populations because

we know that when the vaccine is available it would be very limited. So our next meeting is November the 6th. The department of state health services did release their state plan and the

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plan that basically goes over what the vaccine distribution will be for the state of Texas. The health department will be following that plan. They are encouraging public and private providers to sign up to administer the vaccine in our community. So with the plan that they have, they have four phases. The first phase is potentially limited vaccine between November and December, and then the second phase is a large number of doses that will be released January through July. And this is the phase where they want to make sure that equitable access is provided to vulnerable and frontline population. And then phase 3 is likely sufficient supply that they're anticipating between July to October. There will be much more vaccine in in the community.

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And phase 4 is sufficient supply that will take us October onward. The department will utilize our Austin sales force for our vaccine management. As you all know, that is our platform system that we've been using for testing and for contact tracing. So we will use that for our vaccine management. Especially we know that there are going to be some of the vaccines that are going to require two dosages. So our nurse -- will use our existing hotline and use that technology for that. The vaccine throughout the process will be free so there cannot be a charge to anyone who receives the vaccine. We continue to provide our testing site, dove springs,

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montopolis, walnut creek community and St. Johns, and we always invite individuals to go online to do the testing so you can schedule that. With our long-term care incident management team, what we've noticed is that over the last 14 days there have been about 40 new cases in our long-term care facilities. Our staff are continuing to have those meetings weekly with long-term care facilities and are staff are providing some additional support to those facilities. What we are doing is making sure there is additional ppe that are provided and our epidemiologists has taken a look at their infection control assessment and response plan and has provided some assistance to them so they can make some

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changes within those plans. And that's been the process for us during this time is to be sure whether it's people or strike teams and any kind of technical assistance that we can provide them by looking at their plans. With our homeless update, our contract with Good Work Austin was executed to provide prepared meals for the initiative, which is eating apart together. So we continue that process. Our walk-in services that are available through the downtown Austin community court, those services will be temporarily paused to accommodate the use after Terrazos Library on election day. With our pro lodges we currently have 300 guesting

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it served. Aph is providing rack scenes at pro lodges starting this week, and to date we are excited to say that 49 individuals have exited the pro lodges to permanent housing. So we're really excited about that. We will use our 2.8 million in federal cares for rapid re-housing services and tip to work with our partners to move them forward. As you can tell with the change of the weather, our cold weather shelter, we are making some changes to that process. And we're going to be working with our homeless, security and emergency management, our Austin public health and our parks and recreation department and others to finalize our plans for our cold weather shelter this year. So we're going to be making some changes because of

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covid-19. With our childcare and school summary, we continue to provide additional service to our childcare centers. We're continue to go have our focus efforts. We've added seven additional zip codes, and we're providing additional technical assistance. We are working with the economic development on criteria and guidelines for stage funding and will continue and assist with the rollout. Our staff are working to update an FAQ to add to the additional reopening guideline. We continue to have our information lines open for providing technical assistance to schools and childcare, as well as long-term care facilities. With that, that ends my report. I will transition over to Dr. Escott. Dr. Escott?

[9:15:55 AM]

>> Dr. Escott: Thank you, Stephanie and thank you, mayor and council for the opportunity to update you. On our covid-19 situation, I'll ask you to pull up my slides and we'll get started. Next slide, please. Mayor and update this is a new and confirmed update of cases in Travis county. Yesterday we reported 102 new cases for a moving average of 86 cases. This has been oscillating between 85 and 100 cases for the past 14 days. Next slide, please. This graph is of our new admissions. Again, the yellow is showing the seven-day moving average. Yesterday we were happy to report 11 admissions to the hospital, which is a significantly under the moving average of 21. Similarly this has been

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oscillating around 22 cases on the moving average over the past week so we certainly have seen a blunting of the decline and a relative flattening of the curve regarding admissions over the past week or so. Next slide, please. This graph is displaying three things. The blue is the hospitalizations or hospital beds being utilized for covid-19 patients. The Orange is icu beds and the gray is ventilators. The hospitalizations yesterday were reported at 110 with a moving -- 114 with a moving average of 121. It's been a three week consistent increase in the hospital beds being utilized. The icu beds yesterday, 43, with a moving average of 48. So that represents a three-week increase in the icu bed utilization, but that has been flat for the

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past three days. So again, these are encouraging signs. We've certainly seen a blunting of the rate of increase, but certainly not moving in a positive direction or declining direction yet. Next slide, please. This is an update of the projections from UT today. Again, what we're not seeing on here is the 11 admissions from yesterday, so I imagine that this projection will improve a little bit when that information is updated. But right now still a very concerning trend in terms of admissions to the hospital, projections for the next several weeks, with the current projection on your screen. We are anticipated to cross into stage four territory, surpassing 40 admissions, on

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November the 4th. Again, this projection changes on a regular basis based on what's happening. The data that goes into this is the hospital admissions as well as mobility data. It is certainly clear that people are moving around more. People are interacting more and that is increasing our risk of transmission of disease. Again, as Spencer said at the opening, we have significant concerns regarding the projections projections across Texas. We've seen increases in cases in many major metropolitan jurisdictions. The most concerning of which is.

>> El Paso whose projections are a vertical line up with yesterday reporting more than 1400 new cases. Icu beyond critical capacity and they're in a situation where they are actively increasing their hospital

[9:19:58 AM]

availability through alternate care sites as well as shifting patients outside of El Paso into other jurisdictions who can care for these individuals. This is a projection of the total hospital beds that may be needed in the short-term. Again, the projections here surpass what we saw in June and July in just a few weeks from now. Again, these are not forecasts. This is not what will happen, this is what could happen, this is the best guess based on the facts of the current transmission and if that transmission stays the same and does not improve. Right now that projection is that there's 100% chance that the epidemic is growing in Travis county and 110% increase on active cases as compared to the previous 14

[9:20:59 AM]

days. Next slide, please. Similarly this is a projection of the icu bed needs over the next several weeks. You'll note that by the third week of November, which is displayed here at the right side of the graph, there are more than 200 icu beds. I'll note that we peaked at about 160 icu beds being utilized in our June and July surge. So the projections in the short-term can be bleak, particularly for Thanksgiving. Again, not a forecast, this is something we can absolutely change, but we have to stay vigilant in terms of the social distancing, the masking, the personal hygiene and of course most importantly staying home when folks are sick and getting tested. Next slide, please.

[9:22:00 AM]

Mayor and council, this is an update of our rates by race and ethnicity. This is showing a weekly snapshot of the hospitalizations. This week we're reporting for last week our percentage of hospitalizations in our latinx population, 43.7%. In our white population, non-hispanic, 40%. Our African-American population, 12.7%. So again, another week of improvement in terms of the percentage hospitalized in our latinx community, but unfortunately saying disproportionately, our communities of color remain disproportionately impacted again this week. Next slide, please. This is showing that data based upon number of hospitalizations.

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You'll see that we've had three weeks in a row of increasing hospitalizations overall. The net difference between last week and this week in terms of our latinx community, two additional hospitalizations as compared to last week. Similarly we had a more substantial increase in the number of African-American individuals hospitalized last week moving to 18 from 13. This is a pattern that we will also see later on in positivity where our African-American community is continuing to have increasing positivity over the past several weeks. Next slide, please. This is the same data broken down by decade of life. We can see that the sort of mustard yellow color, the 70 to 79 age group, is getting close to the highest it's

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been through the pandemic. Which is the highest percentage of all the age groups this week. Additionally we've seen increases in the over80 age group represented by the age line. This is concerning because we know that these individuals are more likely to need icu care and unfortunately are more likely to have complications, including death from covid-19. As director Hayden mentioned, some of this is attributed to the rises in cases that we're seeing associated with nursing facilities and long-term care facilityies. By we're also seeing cases in the community for individuals who are living in their home. This is why it's essential that folks are very protective of those who are vulnerable, including those who are older. If you are going to visit a loved one who is over the age of 65, then you need to be very protective of your

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interactions in the previous 14 days to ensure that you minimize the risk of transmission to those individuals. In addition to that, even though they may be family or friends, it's essential that you wear a mask and distance when you are visiting those individuals to further protect them from covid-19. Next slide, please. Similarly this graph is showing us a breakdown by week of the raw numbers of hospitalizations based on age. You can see that we've had, again, three weeks of increases in terms of overall cases. When we look at four weeks ago or three weeks ago we had a 10% increase. Two weeks ago we had a 20% increase. Now that increase is dropping down to 15%. So again, we're seeing a flattening of that rate of increase, which is good news, and hopefully a trend that we will see continue.

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I will point out that almost 60% of the individuals hospitalized last week were age 60 or older. Again, a concerning trend that we do need to reverse and that means again being protective of those individuals by ensuring that we're masking and social distancing around those who are older. Next slide, please. Mayor and council, this is an update of our graph of positivity in the community. You can see that week 41 we had our lowest percent positivity of the pandemic, 3.3%. I will note that we had a substantial increase in the number of tests performed that week, which may have overemphasized the improvement that week. We have seen steady testing numbers over the past several weeks. Week 42, which was two weeks ago, that positivity

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increased to 3.9%. Last week, which is a week that we're still collecting data on, so that number may change, is currently 3.7%. So again, we're blunting that increase in positivity. I think that's thanks to the efforts of this entire community who certainly have taken note of the fact that things are getting worse locally and things are getting worse across the state and across the country, and they are increasing their vigilance once again which will benefit themselves, benefit their household and certainly our community. Next slide, please. This is a breakdown of that positivity by race and ethnicity. The gray line that you see here is our latinx community. You can see that we had been decreasing for many weeks. We had our lowest rate of

[9:28:05 AM]

positivity at rate 41 and over the past two weeks we've seen subtle increases in the positivity with the current data for last week being around 7.3 positive 7.4% positive. Stillwell above that five percent mark and substantially above the green line, which is our three percent mark that we would like to get all our race and ethnicities under. We've also had a significant increase from week 42 to week 43 in our positivity amongst African-Americans. So now more than five% as of the current -- five percent as of the current data for last week. We have more work to do. It's important to add that every person in our community continue to use vigilance in terms of mitigating the risk. The patterns that we're seeing, as move mentioned before, are that are disease is transmitting in social

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gatherings. That's backyard barbecues, family gatherings, that's gathering with friends for football games around a TV in a home. We simply cannot afford to take chances like this. It's important for folks to understand that even though somebody may look well, they still can have the possibility of transmitting covid-19 and it's important to use the same protections that you may use at school, at work, in a grocery store if you choose to have those gatherings despite the recommendations. I understand people are growing tired of not having gatherings and not having life as normal. The recommendation is to do things virtually with family and friends, but if you choose, if folks choose to gather anyway, please apply those protections that you would in other locations so that you can mitigate the

[9:30:08 AM]

risk of spread to your family and friends. Next slide, please. This is a breakdown of that positivity by age group. Again, week 43 is partial data so that is more likely to have significant changes. I so last week about the concerning trend as it relates to our older age groups, particularly the 70 to 79 and over 80 age group. You can see week 40 and week 41 significantly higher as compared to week 39 where we had

no positive cases in that 80 plus age group. We're seeing the last -- week 42 there was a decrease in the positivity. Again, last week is Morley to change -- is forelikely to change significantly once we receive more data. We are also noticing a slight increase in the positivity over the past couple of weeks in our 10 to 19 age group and certainly

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an increase between week 41 and week 42 in our 20 to 29 age group. So again, this disease is spreading amongst all different kinds of age groups. We know that individuals who are in that younger age group, the 20 to 29 and lower, are more likely to have mild to no symptoms. So please, they can't be too cavalier in terms of their ability to affect others. They may be infecting folks and not know about it, particularly early on. So again, I want to encourage our young people, and we should all encourage our children to ensure that they are protecting others instead of wearing a mask and distancing all the time. Next slide, please. As directser Hayden, we had a significant increase in our cases over the past two weeks from covid-19 and our nursing homes and long-term

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care facilities. So the previous 14 days we had a total of 10 cases. The most recent 14 days, 40 cases. So again, we're continuing to work as director Hayden mentioned through our nursing home and long-term care facility task force to help mitigate the spread of disease and make sure those facilities have appropriate support and we'll continue to update this dashboard regularly, which is on our austintexas.gov/covid-19 dashboard's page. Next slide, please. This is an update of our covid-19 case requests related to schools. Again, each of the school districts have their own dashboard, which has more detail. Generally speaking has cases by school. A total of 32 cases for the week of 10-19 to 10-25 in our students. 24 staff cases and one case

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of individuals who are not directly associated with the school, but had been on a campus. Again, we have no evidence of transmission in the classroom setting. These cases are being spread in social gatherings, these cases are being spread in athletic activities and extracurricular activities. We have had one school who had had a sustained outbreak, small numbers of individuals, a total of six, but we've seen two episodes of transmission between athletes or two spread from an initial case to other cases and other cases to additional cases. So in that circumstance we have offered proactive testing for asymptomatic individuals to try to control that event better and certainly something as director Hayden mentioned that we are working on to

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offer to other schools as needed. Again, it appears very safe if school, faculty and staff are continuing to wear the recommendations for masking and personal high general in the schools. We need to encourage that they continue those activities outside of school in social gatherings, gatherings with friends, and we can certainly help to mitigate the risk of spread further. Next slide, please. This is again near weekly update of our influenza cases in Travis county as we are several weeks into the flu season. A total of five new cases for last week, two influenza A, three influenza B, 1.74% positivity rate for those

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rapid flu tests. A total of nine cases so far in our influenza season. Next slide, please. So the blue line represents our pattern this season. You also see the previous three seasons on the graph here. Luckily at this stage we are below -- significantly below the previous three seasons. Again we want to encourage folks to get their flu shots now. The flu shots plus the masking and distancing and personal hygiene have led to record low influenza seasons in the southern hemisphere, in particular Australia. We can do the same here, but it doesn't happen by magic, it happens because a community is engaged in a mission to ensure that we don't face a twindemic of covid-19 and influenza. So councilmembers, mayor,

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people who are watching and listening, please get your flu shot, it is critically important that we are able to maintain hospital capacity for covid-19 for which we do not have a vaccine at this stage. Next slide, please. Again, mayor and council we remain at stage three of our risk staging for our community. Unfortunately we are still maintaining in the middle of stage three. For several weeks we came very close to breaking into stage two territory, but we've got a lot more work to do. Again, if this community can stay engaged and continue to flatten the curve, we have a chance of getting back down to stage two, but it's going to take all of us focused on that effort to ensure that things will look better for Thanksgiving and hopefully Christmas as well. Right now the forecast across the state looks very concerning for Thanksgiving. And if we experience a

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significant surge in the next several weeks, it will last at least through Christmas. So it's -- I think it's in all of our interests to focus now, to avoid gatherings, Halloween in particular, to ensure that Thanksgiving and Christmas will look a bit better than it looks at this stage. With that, mayor, I'll turn it back to you.

>> Mayor Adler: Dr. Escott and director Hayden, thank you. Again I repeat you guys are doing a great job. Our numbers are low even though they've come up from the floor that we had just a couple of weeks ago relative to what we're seeing happening around the country right now. Austin is being able to maintain, it looks like, more of a plateau, but I look at the modeling you gave us from the university of Texas, which would indicate to us that the

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models are predicting that we're going to start moving closer to what we're seeing in El Paso. But anyhow, you guys are doing a great job in Austin and what your staffs are doing. I know you guys are working 2011 on this and -- are working 24/7 for months. I particularly want to thank director Hayden about moving people experiencing homelessness out of the isolation facilities and then into permanent supportive housing. That's the model we need to get closer and closer to in our city moving bandera and we need to celebrate that news as well as an affirmation of that policy direction. We need to expand it and I appreciate the work that real estate and everyone is doing to increase our capacity to be able to do that even more.

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El Paso is of concern. It feels like a month ago that El Paso's numbers were lower than everybody else's numbers. When the governor was coming out, cities were expressing real concern and El Paso was the one that was not, but they're now looking at spikes that are, as you said, literally vertical, running out of room for people in El Paso, talking about flying patients out of El Paso to other urban cities around the state, and obviously that's a concern. The state has sent 900 additional health care workers to El Paso to help with that. Last time we were looking at our spike, our limiting factor wasn't our physical space, it was that staffing question. As we look at other cities right now, it's not just el Paso. Are we beginning to see signs in other cities like Dallas?

[9:40:18 AM]

>> Dr. Escott: Yes, mayor. Dallas is experiencing a significant increase in their cases, their projections are even more concerning than ours. Similarly San Antonio is also seeing increases in cases. And this is similar to what we saw back in June. We saw it start with a couple of cities and then spread quickly. Again, as you mentioned, our biggest concern is in personnel. And if other cities are experiencing

significant surge, that means that redundancies are lost. That our resources are going to be stretched. And this is why it's important for other cities to pay attention closely to what's happening in other jurisdictions because that should make us lean towards a more cautious stance in terms of taking on new risk.

>> Mayor Adler: That's the concern is if you take 900

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workers, health care workers that the state is sending to El Paso, figure out how many that is per capita in el Paso, I question if the state will be able to do that same thing for Dallas and Houston and San Antonio and Fort Worth. I don't think the state has the capacity to be able to do that in all of the cities. And if we're all following and following at the same time, we're all not going to be able to send our patients to other cities because those cities are going to be wanting to send their patients to other cities too. So it's a concern, which is why we have to be really cautious at this point and make sure it doesn't happen to us. I want to talk about the projections a second that the university of Texas is doing. The university of Texas does its projections not just on hospitalizations, but also on checking mobility. It looks at the increased movement of people in the city because increased movement equals increased

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interactions, increased interactions increase the risk of virus. So she uses both of those elements, Dr. Myers, is that correct? I think you mentioned that.

>> Yes, sir.

>> And I just want to reiterate something that you indicated that increased interactions, whether they increase virus or not, depends on whether people are disciplined about masking and social distance and washing your hands, which means that we could have the mobility numbers going up, but not have an increase of infections if we do a better job of masking while we have the increased interaction, which people are saying. They're saying let us go back to school, open up businesses, which has been happening, but the price to be able to do that, the obligation to be able to do that is everybody's willingness and the importance of everybody to double down and do an even

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better job of masking if we're going to be able to do that. So that we can fight against the historical trends and additional actions and increase interactions. We have to figure out how to have increased interactions and not have the infections. I wanted to repeat what former New Jersey governor Christina

Chris Christie said who had its virus and spent time in the intensive care unit that was in. He came out saying that his behavior had been a mistake Andy wished that he hadn't done it and no one should do the same thing. And I loved his line, it was something like never before have so many been asked to do so little for the benefit of so much. And going back to your point, wearing a mask is

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uncomfortable, it's not pretty, it's hot, but it's just putting a piece of material across your face and it is the only most important thing that we can do. And then just to reiterate and then I'll ask colleagues if they want to speak as well. Halloween is going to be critical and most of the -- most of what you said, what director Hayden said is the transfer that we're seeing right now is social gatherings in the evening, which means that people are doing a pretty decent job of masking when they're going out and being around strangers, but in the evening when they're around people that they know, they relax as if people that they know couldn't infect them because they know them. Except that your friends and family not in your household bubble may not even know that they have the virus. But that's the spread they're seeing and it's being then transferred to older people in the community and they're ending up in the icus and in the

[9:45:26 AM]

hospitals and that's what we're seeing in terms of the increase of the numbers that you've got. And finally I got my flu shot. Took me seconds to do it. I did it at the pharmacy. You can get free flu shots with Austin public health, but if you have insurance you can just go get it done at pretty much a lot of the pharmacies in town. Takes seconds. You can arrange for a time so you don't have to wait in line. A lot of people have never gotten flu shots in the past. This is the year to get the flu shot so we don't have two groups of people in the emergency room. And that's one of the reasons why we see the lower number in the southern hemisphere because people are guarding against the flu and we've got to absolutely do that here. Thank you for the work you guys are doing. Colleagues?

>> Harper-madison: Mayor Adler, because you can't see me I just want to get in the queue, wherever you see fit to put me, if you just pop me in the queue.

>> Mayor Adler: Since

[9:46:26 AM]

you're not feeling well I'm going to pop you in right now.

>> Harper-madison: I'll take it. Two things. I had the opportunity to stay in our isolation facility this week because my family was inadvertently possibly exposed. The good news is everybody tested negative. My whole family and the family that ended up getting suggest and having some fever, it was probably just a stomach bug. Everybody is okay, no covid, but that to say one of the things that I observed while I was there was just how few people there were there. I think we are utilizing it to the best of our ability, but I just want to put the word out. We have a fantastic facility and a system that works really well and it was super comfortable. I just want to make sure that people know that we have this option, this magnificent option. If you need to isolate we have a magnificent option for you. So I wanted to put that out

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there. And then the other thing I wanted to ask was director Hayden talked about the phases of the vaccine and I'm just curious about that phase I that said November to December. Are we talking early November or late November?

>> From the information that we've received, it changes. So that's why they've given us the november-december time frame.

>> Harper-madison: So we don't quite now?

>> Exactly.

>> Harper-madison: I'm sorry, Dr. Escott?

>> Dr. Escott: I'd say that December is probably more likely than November. There's still a lot of moving parts that have to be sorted out. We have to have a vaccine which is approved. We have to identify distribution plans. I really don't think at this stage November is a realistic possibility. But that is what we continue

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to hear, november-december time frame.

>> Harper-madison: I appreciate your candor. I tend to be an optimist until I'm not, so I was thinking if you say november-december, that means December. So I was thinking that was the case anyway. So thank you for your candor. The last thing I'll ask is my family, what we thought we'd do for Halloween is get some like party favor bags, gift bags, and wear ppe and gloves and washup and put candy in the bags and then have the bags be on a table in the yard or in the driveway or whatever and then let kids get candy that way. I'd just like to know in y'all's professional opinions what is the best way to distribute candy to neighborhood kids? Or do we just say we're not doing it this year and be occur municipal judge -- and be curmugeons. And turn our lights out?

>> Councilmember, I'll tell you what I'm doing, I'm turning my lights out, but

[9:49:28 AM]

we have to understand that people will do it anyway. So we recommend that people don't do door to door trick or treating because it's not just the interaction of picking up candy from neighbors, it's the associated activity that is likely to occur as well where people are gathering. But if you choose to do it, I think what you have described is the best solution. Pre-bagged candy sitting on a table, people pick up a bag, there's not person to person interaction, and there's decreased risk of what we call fomite transmission or transmitting from the candy to the individual receiving the candy. So again, if people are choosing to have Halloween activities, choosing a safer system to do that hike you've just described is the way to go.

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>> Hayden: The other thing that I would, just as a reminder on our website and with the information that our communications team has sent out, we've put together some guidance about kind of the risk with the various thing that you may decide to do during this process, so we definitely want folks to look at that guidance because it does go into if you decide to go out and do trick or treating, this is the safest way in order to do that.

>> Harper-madison: Thank y'all very much. I appreciate that and it will give me something to think about as we prepare. We might just stand in the yard and wave at people, but thank you very much. I appreciate your candor.

>> I'm sorry, go ahead, Dr. Escott.

>> Dr. Escott: I wanted to comment a minute on councilmember harper-madison's description of the isolation facility

[9:51:34 AM]

and what she went through. I think this is a display of exactly what we need people to do and how we need people to think throughout our community. Covid-19 has non-distinct symptoms, cough, runny nose, fatigue, etcetera, etcetera. There are a lot of things it could be, but the assumption people need to have if they develop any of those symptoms is that it is covid-19 until I can prove that it's not. What we're seeing happening now because we're entering cold and flu season is people are assuming that it's, oh, well, I feel kind of okay, it's probably not covid. And they're going about their daily business and may go to school. They may go to work, they may go to the grocery store or pump gas and then they find out later that it is and have exposed other people. If we can get folks to be vigilant, if they develop

[9:52:35 AM]

any of those systems, in that same day go online to schedule a test. They can go to their health care provider, they can go to a pharmacy. There are lots of CVS pharmacies and other pharmacies who offer tests. If they can do that in the same day or the next day before they make the decision to go about their normal routine, then it will help to further protect this community and certainly will help to contribute us having a better Thanksgiving and Christmas than the current projections indicate.

>> Harper-madison: If I may, Dr. Escott, real quick. I know, mayor Adler, you were about to say something. Please don't forget. I'm sure it's important. For us, our situation was I had a friend who passed away and it was expected, but while I was attending to her expected passing, I needed somebody to take a look after my kids. And we've been so careful since March, we don't go anywhere, we don't do anything. We have been so, so careful

[9:53:37 AM]

that we made a really calculated risk and had the kids go be with a friend. And as soon as she recognized that one of her kids had a fever, she called us and so the way it played out for us was calculated. I never actually exposed to my kids. My kids had n95s and Childs. What I would like to remind people of is even if you don't have symptoms, if you just think you might have possibly, potentially put yourself in a situation where you were exposed, the fever, the tummy ache, some of the symptoms sounded like they could be covid, I had to remind myself that I wasn't being paranoid. I had to say well, what's the alternative? What if my kids were actually exposed to covid? So I just think we definitely as a community in general are doing a thing where we are assuming that if you don't feel some

[9:54:37 AM]

symptom -- like I want to remind people to take into consideration the circumstances as well. Just in case, you know. And we have resources that are available for that eight days of waiting just in case, just to make sure you're okay and you're not going to infect yourself or people in your community. So if I could just add that to whatever it is that you already presented to them about symptoms. If you feel like you may have been exposed, take the opportunity to isolate yourself and your family and your community.

>> Mayor Adler: Thank you. Councilmember pool.

>> Pool: Thanks. I was just curious, Dr. Escott, how long on average are people staying in the hospital? And also on a haven't later?

-- A ventilator, what's the average stay?

>> Dr. Escott: I would have to pull the numbers.

[9:55:37 AM]

When we looked at them earlier this year it was less than a week on average for most individuals. If individuals require a ventilator, significantly longer. We are finding that less -- the smaller percentage of people require icu level care than early on, and that's because our hospitals are getting greater at caring for -- are getting very good at caring for covid-19 individuals. So individuals that may have required that intensive care before can be managed on a step-down unit. And similarly we're -- we've seen anecdotally that the length of stay has been decreasing as well. And this is thanks to identification of effective treatment regimens that are helping that process. So I'll see if next week I can update the council on those length of stays.

>> Pool: That would be great. Thanks so much. Appreciate your efforts.

[9:56:39 AM]

And you too, director Hayden.

>> Mayor Adler: Colleagues, anyone else? Kathie?

>> Tovo: Thank you very much. And Stephanie, I think -- director Hayden I think was talking about this handy dandy sheet that we've used in our house to talk about different activities that you can engage, you and your family can engage in at Halloween and different layers of risk. Ranging from really low risk activities to higher risk activities. So thank you for pulling this together. I know this is based on the CDC's information about Halloween, but thank you for pulling it together, our public health, for a way that is really done

[indiscernible] For here in Austin. I want to ask a question about something on here that is also on the CDC guidelines. There's been different information and newer information about the extent to which surfaces, germs can live on surfaces.

[9:57:39 AM]

And I did notice that both the CDC advice and Austin advice talks about leaving -- it says take only wrapped candy and leave unwrapped candy for 24 hours before eating. So Dr. Escott, I wonder if you could address that? I think as the new information has come out, you know, I have heard repeated again

and again surfaces aren't a problem. I understand it's not the highest risk for contracting covid, but can you help us understand why that advice is on here, the Halloween sheet?

>> Dr. Escott: Certainly, councilmember, as you just described, that fomite transmission, the virus landing on a surface, somebody that is potential route of transmission. It is probably not the most important one but it is one that we need to be aware of .. So putting that candy away for 24

[9:58:41 AM]

to 48 hours helps to decrease that risk of that virus surviving on that surface. You know, light levels, temperature levels, the type of surface affects how long it will last. So that's why that advice is there. Certainly, you know, also important is avoiding the touching of the face without clean hands. But, you know, I agree the candy needs to be put away and decrease that risk or cleaned, yes.

>> And then I wanted to just ask you a couple of questions about your grasp but also I had a couple of opportunities in the last few weeks to observe groups of especially teens but also adults who are masktd six masked but also when they greeted each other hugged each other and I know that you have emphasized throughout the importance of

[9:59:42 AM]

being masked and maintaining social distancing and some of it may be fatigue from the precautions but I also wonder if there is an unconscious narrative forming that if you have a mask on you can be within that six-foot bubble and you covered yourself. It is almost like there is an or instead of and so I just wanted to ask you to address that. Again, I saw it most prevalent among teens who the hadn't seen each other in a while but I saw some adults engaging in that behavior too, masked but, again

-- yes, so this is really what underlies the challenges we had with the masking recommendation in the spring, because this is what we can saw in 1918 and 1919, where folks put the masks on, disease transmission was suppressed and then they became comfortable and they started closing the distance between the

[10:00:44 AM]

individuals and they experienced a second wave of the pandemic then. So we are at risk for the same thing. It is masking and social distancing, you know. It is at least three feet preferably six feet of distancing between individuals to be protective, certainly I understand folks are starved for human contact but again we are still at risk and the November, December, January, February time frame is

certainly ripe for concerning surges in our local community as well as across the state, across the country, so we really do need to maintain that distancing as well.

>> Thanks, I think that is especially important as more of our schools are going back to live, to in-person instruction and changing classrooms and things like that this the next few weeks.

[10:01:45 AM]

I want to quickly -- I think I have one last question and that is looking at slides 11 and 14, I was looking at the age groups 10 to 14 so I think from

-- it looks to me on slide 14 as if that 10 to 19 range is still, you know, has a pretty hypos 50 rate, compared to previous weeks going down a little bit, but the reason I was particularly interested in looking at that is, because we talked so much, we talked rightfully about the dangers to older individuals, I noticed on chart 11, I wanted to make sure I was seeing this correctly, right now we have the

-- one of the highest groups in the hospital is that fine 19 age

[10:02:45 AM]

group. Am I interpreting that correctly on slide 11?

>> , No councilmember, the 10-19 age group is the gray line, third from the bottom.

>> Tovo: That's the wrong grade, thank you.

>> You betto toe thanks very much.

>> You bet.

>> Mayor Adler: Okay. Alison.

>> Alter: Good morning. I wanted to ask, I am not exactly sure who is this is before but we are getting some questions about playground openings and sports and trying to understand kind of different choices that are being made by the city and aid so can you provide like how you respond to those that are asking how we are

[10:03:47 AM]

assessing playground and use force risk when aid and some sports options are available in adjacent counties? And how do we think that these activities can or would impact our numbers?

>> So councilmember I am happy to answer that, you know, right now, as I mentioned earlier, in schools, we are not seeing transmission in classrooms. We are seeing effective transmission in athletic activities, we are seeing it in football and seeing it in cheer leading and seeing it in volleyball and -- as well as other extracurriculars so we are concerned about opening up risk further, particularly in those activities where we are seeing effective transmission happening. So our recommendation has been to hold off in opening the city facilities for U sports because of that concern.

>> Alter: We also have some

[10:04:47 AM]

playgrounds where there is not a lot of rhyme or reason to what seems to be which are open and which are not. Can you tell us a little bit more about the choices that are being made there?

>> I would have to talk to park about the particular play -- I am not sure if director Hayden may be able to answer that one.

>> Yes. What we have been working with argued, we meet with the parks and recreation management team weekly and as we have worked on, we have worked on a phased in approach, and so those playgrounds and those U sports are on the last phase, and so what we have been looking at over the last counsel of weeks is that, you know, we were getting close to being able to say those areas would be able to open, but after we started to

[10:05:47 AM]

look at the data, the data has changed significantly, and as Dr. Escott stated earlier, you know, we are looking at the projections, and so because of where we are headed we have talked with the park staff about this week when we meet we want to be able to look at the next couple of weeks at a time. And so that is basically our process with them. We meet we cannily but we look at additional operations to open that will be safer for it, and we are also, as Dr. Escott stated, we are looking at it more comprehensively, because we understand from par, if it is a shared type of activity where there is a school and park and recreation facility the school has decided to open up some of their -- some of their

[10:06:49 AM]

playgrounds, so in that instance you may see that some of those playgrounds are open. And so we will continue to do that throughout the process, this process.

>> Alter: Okay. I think it would be helpful if possible to get something we can share with people that helps them understand the choices that are being made, the U sports, the youth sports it seems like to playgrounds and youth sports may not be the same, they may or may not be the same issue because you can still be at that, some of these playgrounds you can be at and there is nobody else there but you are still not allowed to use them right now for the play escapes and others things so if we can just get something written that quick share with folks to help them understand the reasoning one way or another .. So people can make appropriate choices I think that would be very helpful for us escapes escapes .. Are we

[10:07:49 AM]

seeing any transmission at aid playgrounds? I know yes said we are seeing it in sports, but do we have any sense that we are seeing it in the playgrounds either at aid or any of the other schools? >>

>> I am not aware of cases related to playgrounds, but I would have to get with our epidemiology team to see if they had any specific cases mentioning playgrounds. Obviously the challenge is pinning down where transmission happens but again I am not aware of any transmission in that setting at this stage.

>> Alter: Okay. I just think we have to be thinking about the trade-offs and I know that my view that there is a difference between the sport situation and the playground situation, so if we can just get some better data that would be great, if we could.

[10:08:49 AM]

The other thing I wanted to ask about is the resources that we immediate, you know, moving into January for our public health response and how prepared we are with respect to that, and if there are things we need to be doing for that. I don't know if that is Dr. Hayden or Mr. Cronk but I would like to know a little bit more about what we are anticipating as needs for public health effort with respect to covid but then also any sense that we have about what is happening with that supposed \$5 billion that the governor is sitting on that needs to be spent by the end of September and any discussions that are happening with respect to that, because that money would be super helpful even if we got a small portion of that for us to be able to move forward with the relief that we need for economic recovery but also as we are planning for more prolonged pandemic response.

[10:09:52 AM]

>> Thank you, councilmember, I can't speak to the resources that the -- at the state level. I know our government relations team is actively following that, but we have constant dialogue with our public health departments, the resources that, of our overall community needs and what is available. Again,

thanks to the leadership of our council, those that have the framework established, our budget staff is planning to provide an update on that framework in the coming weeks but unfortunately we do have contingency still in that -- those allocations. But this is an evolving situation and as the resource needs change over time we will see if we need to redistribute that in a different way, but I will pause and ask if Dr. Hayden wants to add anything to that.

>> Oh, yes. Thank you, Spencer. The team has put together a rubric and we have sent that

[10:10:53 AM]

forward to the budget office. We are going to be meeting with them to talk about what next year would look like from a calendar year expense, but also looking from January through September, the goal is to, we will continue our efforts, our contact tracing, you know, all of our alliances we have set up so all of the things we currently have in place we will transfer that over to January through September. What we are anticipating is is that there may be some additional financial assistance that will come through the state or vaccine dissemination. There is no guarantee, but typically in the past, what happened with H 1 N 1 in 2009 is

[10:11:54 AM]

that we did receive additional funding through our public health preparedness team and were able to, you know, move that into our response. We are reaching out to the state to have conversations about any additional funding, and so once we hear back from that, we will be working with agree agree on that.

>> Bre on that response. I don't know if bre is here and can update us or if that is not the appropriate way to do that, I would welcome a conversation to understand what the status is on that \$5 billion, if that is in fact the right amount of money, in fact that is a lot of money that would be helping a lot of people and cities and schools, et cetera, around the state. Councilmember he is not, she is not on the line but we will try

[10:12:54 AM]

to find a way to update you and your colleagues on that.

>> The rural that I have heard, rural, rumor that I have heard, Alison is the governor is going to take that money to .. Fund loss of revenue in the state budget, that is pure rumor, I hope that is not true, because that doesn't seem to be what those dollars were intended to do, and there is so much need right now among people in the state that I hope that that is not the case. Mayor pro tem.

>> I'm sorry if I missed this, but there was a flu vaccine, I guess not distribution, but we offered it in southeast Austin this Saturday, I believe, and I was curious if we met the -- I

[10:13:56 AM]

think it was 200 offered, I was curious if we -- if more than 200 people showed up or if we had more flu vaccine at the end of that.

>> Yes, we did provide 200 flu vaccines and there were more folks that did show up. What we typically have done is that we have referred them to -- because our flu, we are doing flu at our fox for trots in south Austin and north Austin, but we also are partnering this weekend, a couple of events in the community. One is going to be Al del valle, at Ojeda middle school and then we will be partnering with .. Travis high school for boo the flu this Saturday and then November 7th we will have a

[10:14:57 AM]

large flu vaccine where we are going to be at the expo center and we are going to provide 600 flu vaccines at that one.

>> Garza: Okay. Great. I was going to ask about the November 7th and if we were prepared to probably - a large attendance. So thank you for doing that and I appreciate how you prioritized people that are uninsured and lastly also thank you to public health for the fires that councilmember tovo displayed. I have the electronic versions on my public page and they also displayed similar information for Dell muirs at the for, de los muertos in Spanish and English so thanks for providing that information and if anyone quantities the electronic version I am sure they can provide that but it is also on my public social media page, so thanks.

>> Mayor Adler: Thank you.

[10:16:00 AM]

Councilmember kitchen and then councilmember Casar.

>> Kitchen: Thank you all. This is very helpful. I appreciate the discussion and appreciate my colleagues for the questions that they have asked. I have two questions that I would like to ask. The first one, Dr. Es O Scott or director Hayden I am not sure but I wanted to ask about the rising cases at the nursing homes. Do you have any, at this point, any indication of what might be driving that? In other words, are you just -- are you seeing it, some isolated new facilities that are experiencing this or are you seeing it in facilities

that have gotten the outbreak under control? What can you tell us at this point about what you are seeing and if you have any indication about what is driving it?

[10:17:00 AM]

>> Yes. Councilmember kitchen. What my team has communicated to me is that 32 of the 40 cases actually occurred at the Austin state supported living center and so our folks have -- are working very closely with the state on that, at that facility, we already have met with the folks from the state with their state epidemiologist has met with our local folks. We have provided the ppe, we have looked at their risk assessment so they are making really significant changes and our shown that that will turn around and so, and, so, yes, we are working very closely with that facility, the rest of them are kind of spread out throughout the facilities.

>> Kitchen: Okay. Thank you. My second question relates to

[10:18:01 AM]

the pro lodges and the connecting -- connecting folks to, you know, to housing and other supports. So I really appreciate the progress that has been made. I wonder if you could give us some idea of the challenges you see. I think you said there are about 49 if I am remembering correctly and I know number has remained

-- I mean, although it has been steadily growing, it is not growing real fast, you know, in terms of getting the connections made and I know we.

>> Over 300 folks he, if that is right in those pro lodges so I just want to understand if you help us understand what kind of challenges you all are seeing to making those connections if there -- I am just concerned can at the rate of -- if we continue at the rate and -- we may not

[10:19:02 AM]

get them all connected so I just want to understand what challenges you are seeing. And what needs to happen to make that happen.

>> Well, I mean, we know this is going to be a huge challenge.

>> Kitchen: Okay.

>> And so that is why it has been critical for us to bring all partners on afford to assist us with these efforts. We know that the plan is to close protective lodges 1, 2, and 3 in this process. And so -- and so

the folks have been working very closely as you know, downtown Austin -- will have a staff person that will be assigned to each of the lodges with a supervisor and of course housing is always a challenge. I mean, it always has been.

[10:20:04 AM]

We do have some folks that don't have any income, and so of course that is a challenge, because we have to work with them to get some level of income before you are able to place them. What the team has really been doing with the partners is, is that they have established a process, they do develop plans and based upon those individual plans, you know, they are -- you know, they are not moving, you know, at lightning speed but I really applaud the team because it is roughly about seven folks that they are placing like every week or so, so every seven or ten days, folks are finding housing so that is really significant. And then I think the other thing that, you know, we have to keep in mind is that the rest of the

[10:21:07 AM]

folks that are working with homeless folks are placing them as well, so across our community, I believe it has been about a 1,300 folks that are, you know, have secured housing in some way or another, rapid rehousing or affirmative supporting housing but our staff will continue to work with them and work with the real estate office. We know we have to be really creative in some of our efforts so we are will be tag as well. But we have some key folks that are stepping up. We are changing our model, bringing on more partners, carrot top agreed to assist us, and so that will be significant for us. We will also be using some of our best single source, that pot of funds as well to assist us.

[10:22:10 AM]

So we are really hopeful about the process and we will continue to provide those updates.

>> Well.

>> Kitchen: Well, I appreciate and have absolute trust that the

-- that you and your staff and everyone involved are doing everything they possibly can and thank you for that. That is helpful to understand, roughly speaking about seven every week or so. That is helpful to understand. What I wanted to understand is before we get to the -- that we have to close those down, assuming -- I think -- did I hear you right that we have to work towards the plan we are going have to close down the pro lodges? Because of fund something.

>> Yes. So we have identified the three.

>> Kitchen: Okay.

>> -- That will potentially close.

>> Kitchen: Okay.

[10:23:10 AM]

>> And the point is we would need to close them by December 15th, which, you know, allows us to return the property back to the way it was leased to us kitchen okay.

>> So that is is the plan.

>> Kitchen: Okay. What I would like to understand, you know, like perhaps at our next briefing in November, which is in a few weeks, if that is a good timeline, or -- I would like to understand before the end of December 0 what our projections are, if we are going to be able to place everybody. And I understand there is a lot of complexities, but I know that our policy and our approach is that we -- these are folks that -- you know, are living outside or in the streets in the past and we don't want to return them to being in this situation. So I know it is our policy and

[10:24:11 AM]

our goal to connect them to housing. So what I want to be able to understand at the right time and before we close them, I want to understand what our projections are in terms of being able to place people and if there are continuing to the extent that there are continuing challenges I would like to be -- I would like our council to understand what those are and if there is something, you know, that needs to happen at the council level to address those, because we are talking about almost, what -- what is the number? Why don't you let me know how many more folks do we need to place?

>> So currently, the census is 300, and I don't have that like right in front of me. Okay.

>> Well, just roughly speaking is fine.

>> So roughly we have 300 -- we

[10:25:12 AM]

have 300 folks that are at those

-- the total census is 300. And so we are probably looking at close to about 220 people from protective lodge 1, 2 and 3 3. That we have to find housing for.

>> Kitchen: Thank you very -- thank you very much, I appreciate the update. What I am trying to get to is I think it is important from a council perspective that we understand the path to carrying out of the policy that we are all working towards, and that we understand what kind of challenges you may be finding and what it might take to address those challenges, because I think that is our responsibility as a council to help you with that and we have stated as a council it is our priority to address connecting pokes to housing and so this is

[10:26:12 AM]

one -- I mean this is certainly not the only group of people that we need to be focusing on who are experiencing homelessness but it is a group of people who are on the path to housing that we do not want to end up back on the streets, so thank you very much and maybe we can look for some kind of additional conversation in November, if that is the right time. What we can do at our next briefing is go ahead and provide those projections to you as well as what is the plan to move forward, and then that way we are able to, you know, let you know how many pokes -- how many are successfully housed and also let you know of any challenges that we see and if there is any assistance at the policy level that we will need. I kitchener ranger thank you very much. I know is very difficult work and I really appreciate all of

[10:27:14 AM]

you -- you and all of your staff who are doing this work ..

>> Thank you for your support. We appreciate it.

>> Kitchen: Thank you very much.

>> I think I was up next. On councilmember kitchen's point, I would be interested next month in making sure that there is a backup plan if it is necessary to have a different pro lodge or extend one or two of them for longer in case it is taking us longer than necessary. I know that obviously the council allocated a significant amount of dollars to keeping people housed in the budget. Some of those western just looking at -- a year, we haven't executed some of those contracts yet and so there is necessarily some one time savings there the already sparse I can tell.

[10:28:15 AM]

So there or some other places we might be able to, if necessary, as a backup option, of course, the best thing would be to house everyone and let them know we can't be sending anybody back to the streets in December but knowing how hard this work can be, and given all of the other things public health is having to deal with in a pandemic, I just want to express that I would rather have a the backup plan and have us find dollars than send anybody badge to the street from the pro lodges just because the federal government has refused to negotiate a covid package that everyone in the government seems they say they want to pass but choose not to pass. So if they are going to keep doing that, I want us to have a backup plan and --, you know, not fall on the most poor people in the community. I think we are getting a little interference from councilmember kitchen. So does that make -- does that make sense no I don't want to ask for a backup plan if you

[10:29:16 AM]

like, Greg, we have this totally covered. Don't worry about it. But I just want to express, I think, that we are --

>> Yes. Councilmember Casar we can do that with the information we have back in November and that way we can have a conversation about that as well.

>> Casar: Thank you. I think from people on the ground .. Social service providers, people in ems, down town court, that what is being done is really, really powerful work at those pro lodges. This is something we should be doing all the time and so I appreciate the staff working there and I just don't want to cut any of that short based on an arbitrary deadline. If there is more work to do, so just keep us posted. My next question was one quick one for Dr. Escott and I may be looking at the numbers wrong but usually when we see that kind of spike projection in

[10:30:18 AM]

hospitalizations from the UT center we are usually seeing a rise in cases in positivity rates and then the hospitalizations coming afterwards -- didn't seem to spike as much but we have seen the spike in hospital says obviously we just need to tell everyone to take serious precautions and not let up but is there any reason for what we see as this difference and how this is working? Usually the hospitalization, lagging.

>> That is correct, councilmember and we have a team trying to sort out why we didn't see the cases rising before, before the hospitalizations did. This may have to do with a transition in the community to antigen testing which is can currently to the counted in the confirmed case numbers. So we are working on a solution to also report antigen test positives publicly so that we can have a bit more intelligence

[10:31:18 AM]

on the current situation in the county.

>> Casar: Can you flesh that out more? Because we have gotten questions about the kind of tests people should take, what information is good and isn't good information. Can you flush that out for us?

>> Sure. The gold standard test is the pcr test. There is a send-off test, there is a rapid test. What we have seen lately is the antigen test and director Hayden mentioned those earlier that we are going utilize for some school testing. The about general testing, antigen test is very good Al Wes, about 98 percent specificity, it may miss some cases a pcr would detect, but it would be a very malnumber of cases, .. So the threshold between the two is really a matter of hours in terms of the doubling time of the viral load. And so we have confidence in the

[10:32:21 AM]

antigen testing, obviously there are some nuances associated with testing based upon prevalence of disease in the testing population that is going to impact the positive and negative predictive values of that test, but people should feel fairly confident in either an antigen test or pcr test. The antibody tests are really not of substantial clinical use if someone is trying to determine if they have covid-19 or not.

>> Casar: Thank you for that. Also to mayor pro tem's point, thank you all for the events you did in northeast Austin and southeast Austin for the flu, for flu vaccines, and a I was at the one at northeast high school there at Nelson field, people were showing up for food and for school supplies and for those flu vaccines and the line was almost a mile long from -- for

[10:33:23 AM]

those of you who know where Reagan high school isness and 90, it stretched from the access road all the way to I-93. I walked for about ten minutes just greeting people the line and I didn't he get to the end of the line. So the need is just so real out there both economically for things like flu and for the flu vaccine and I appreciate all of the work we are doing, but clearly there is just a huge, huge gap for people that we still have a flu line of almost a mile long of cars. So again, just for our council, just important information there as we -- as we recognize how serious this work continues to be on public health. So thank you all for everyone who is working on this.

>> Mayor Adler:.

>> Mayor --

>> Mayor Adler: Page.

>> Ellis: And then --

>> Thank you, I was having

[10:34:24 AM]

internet issues yesterday so I hope it hangs with me today. In the, I appreciate the earlier conversations we had about Halloween and there already has been kind of some questions and discussions around Thanksgiving because that is coming too, and so I know this is tough when we talked about it for memorial day and the 4th of July and labor day, but there is not going to be a special moment in a couple of weeks where all of a sudden it is okay to go back to normal behavior, so as people are thinking about what their plans might be that they are continuing to figure out creative ways to still enjoy their holidays and just make sure they are doing it in a way they are not going to be infecting their loved ones and their family members. I am guessing we are much more likely to try to be closer to the people that are our closest friends and our parents and our kids, and I just -- I feel like the conversation every holiday is about, hey, what is the going to be okay and what is not?

>> Ellis: I want to make sure

[10:35:25 AM]

we are reiterating the fact you have to reinvent everything that is personal. Everyone's birthday this year use different, everything you are trying to do with your family add friends has got to be remote, has got to be distant. I think people sometimes also forget that wearing a mask is so much about you, not spreading that jernl, you know, we hear it time and time again, but I still feel like people are maybe thinking I am okay to risk it or I already got covered and recovered therefore it is not important for me to wear a mask and it is just not happening that way. That's not how this virus works so there still needs to be lot of precaution in our community to make sure we are taking every step that we can to protect each other and I am not sure I think maybe Dr. Escott stepped away but maybe director Hayden can help me understand another question I had about once a vaccine is available, what does that mean for transmission? Would people still get the virus

[10:36:27 AM]

and just wouldn't -- would they not spread it or would they carry it and possibly infect somebody else? They are just not feeling symptoms any more? Can you tell me a little bit more about how that works once the virus -- once the vaccine is put out in a more official way?

>> Well, search still receiving information about how effective the vaccine is. You know, some of the information that has been provided comes as between 60 to 70 percent effective. So, you know, because it is such

-- it is going to be such a new vaccine and they are still learning about covid, think about how, you know, with flu over time, so basically every year with the flu vaccine, we will provide the flu vaccine to our community, but how it is put together is based upon what we

[10:37:29 AM]

have seen the previous year with the different strand of flu, and so that same type of practice is going to have to happen with covid. So our hope is is that, you know, we are able to get as many folks the vaccine and we are anticipating, you know, John through -- and I hate to say it this time next year being able to continue to provide that widespread use of the vaccine and then our hope is that once we have more folks in our community -- you got muted.

>> -- Continued, I am sorry, continuing to do our practices that we have establish, because we are going to have to continue to wear our masks and we are going have to continue to socially distance, even once we

[10:38:29 AM]

start providing the vaccine early on. And so as we receive more information we can provide that, but that is information that we received thus far about how effective the vaccine will be.

>> Ellis: That is really helpful to understand, because I know, you know, the flu shot each year will change a little bit and it is just so important knowing there are people out there that, you know, for one reason or another decide not to get their flu shot because they don't think they got the flu, and it may not mean that you are not getting it, you are just not feeling symptoms and you could be inadvertently spreading it to other people so I think it is so important to know that in all likelihood the covid vaccine is going to operate very similarly to the way these other flu vaccines may need to be gotten again and again as it develops and as the science improves on understanding that. Thank you, director Hayden.

>> You're welcome.

>> Mayor Adler:.

>> Mayor --

[10:39:29 AM]

>> Mayor Adler: Go ahead.

>> Yes. Mine is more of announcement, we are not going to have our 30th annual Halloween block party and we have notified all of our residents on our block and passed out a sheet just identical to our most, to what the health department put out on the precautions that we need to take and if you going to be serving candy, you know, to do it in a safe manner, so I really am prescient that, to get that information are the health department. But, unfortunately, this covid-19 is so dangerous and we don't want to expose our children and our families to any kind of covid-19 so we are going to cancel but we will be back next year even stronger.

[10:40:31 AM]

>> Mayor Adler: Colleagues, anything else before we let director Hayden go? Director Hayden and Dr. Escott, thank you so much for the work you are doing. We will move on. Thank you.

>> Thank you, mayor. Have a good day.

>> You too. Speaking of celebrations, and how we do it differently, we don't sing happy birthdays anymore, but at least why while we are all standing in front of the screen, but it was Spencer's birthday this weekend, so I want to make sure that we wish you a mean birthday and we will save you from the song. Colleagues as we are all -- I know we have one old item to address, item number 43. Councilmember Flannigan, you pulled this one.

>> Yes. This is a pretty short one, and

[10:41:31 AM]

I just wanted to pass, ask the sponsors if the intention was to

-- I mean what does it mean similar to the one that ex-snyder because I believe there are parts of that contract that require a conference to be held, I think it might be just better to have the staff negotiate and execute an extension or a new contract and not have this line about similar to, because we actually may find some things we want them to do that are related to the saves resolution or helping us identify iconic businesses, playing a role in that, so let the staff have a little more flexibility negotiating. >>

>> Mayor, can I go ahead and answer that question?

>> Yes.

>> Councilmember Flannigan, we are happy to put more specificity there and give the staff flexibility, we just put similar because we recognized like you said there are some aspects of that contract that they won't be doing because they

[10:42:33 AM]

involve, you know, the in person activities. So I can make those changes and, you know, put them on the message board and see if they get to what you are talking about, but basically I hear you saying we want to give the staff some flexibility there.

>> Yes.

>> -- Specificity to the prior contract that probably would be fine.

>> Okay. We will do that.

>> Thanks.

>> Mayor Adler: Is staff here on this issue?

>> Mayor this is Rodney Gonzalez. Yes, we are here.

>> This would be an action to undo what staff had done or direct staff differently than staff had decided? Do you want --

>> Mayor, could spike to that? That is really not purpose of what --

>> -- Staff had not extended the contract and you were saying,

[10:43:33 AM]

hey the circumstances --

>> The staff didn't have the authority to extend the contract.

>> I will be more precise. The contract didn't have an extension clause in it, other contracts do. So there is to give them the authority to extend it.

>> Mayor Adler: Okay. Rodney this is something you would have extended had you had the authority to do it but just didn't have the authority to do it?

>> Mayor, I think those are two different things. I think what councilmember kitchen is saying this would give us the authority if we wanted to do so. I believe that's what she is saying. With regard to the staff's intention, it isn't our intention to extend the contract .. We had intended to use those moneys for needs assessment study in the current fiscal year.

>> Kitchen: Well, mayor, may I speak to my intention?

>> Mayor Adler: Yes. And that's why I thought I would raise this issue here, because I wasn't sure -- I wanted to make

[10:44:34 AM]

sure everyone was on the same page.

>> Kitchen: Okay.

>> Mayor Adler: But you can speak to your intention and then I want Rodney to speak to what the staff's intention was. Go ahead.

>> Kitchen: Okay. So what this resolution does is just says, as councilmember Flannigan mentioned is to direct the negotiate and negotiate a one-year contract, so that's an extension. The background, as I understand it, is that aiba's contract expired at the end of August and was not extended and if I am understanding correctly, there is no additional contract in place with aiba. So I think extending the contract lines with the memo that was provided with us last year in October, which was the context for everyone, as you remember, is that there was, in

[10:45:35 AM]

response to council's direction there was an analysis of the dollars that were provided to all of the chambers and including aiba and there was a recommendation in October about a new methodology for how the dollar amounts would be determined for each of the chambers, and the recommendation in that memo is to extend everyone's contract, all of the

-- all of the chamber's contracts for additional year while the council -- while the staff was working on I guess bringing back to us recommendations for how each of those contracts would be funded. So that didn't happen in this case. This aiba contract was not accidented so I think this -- it alliance with the memos. The other issue, of course, is that this contract was -- this

[10:46:37 AM]

contract -- this contract -- what this aiba does is supports our ibiz districts and primarily with marketing and other -- and so by just not continuing the contract there isn't a plan for supporting the ibiz districts. So this is -- what this does is it alliance with the -- last October to continue funding iep a, iaba and to continue that support through the districts so I didn't see it as con train to what the staff .. Wanted to cobecause I didn't see the staff as not wanting to support aiba because they are recommended to continue in that memo and in that memo that memo recommends continuing them with -- there are two aspects of what it recommends. It recommends continuing their

[10:47:37 AM]

support for the ibiz district and also to councilmember Flannigan's point, perhaps, there is some discussion about collaboration with some of the other chambers. So, mayor, I didn't see this as out of line with what the staff recommended to us in their October memo.

>> Mayor Adler: What I am looking for is staff perspective on the contract. I thought that I had heard staff was going to be bringing back the chamber contracts in mid November. And then in December coming back with the equitable contract items. So I need to better understand how this fits in and what your recommendation is and how we are

[10:48:41 AM]

handling this. It makes me a little bit nervous to be getting a particular vendor that we approved from the dais as opposed to approving a general area, unless this is in response to -- general area but then to know the individual decisions, so, you know, my understanding is that historically back in 2013 this was also identified as a specific vendor direction coming from council. I don't know whether that is true or not. But anyhow, that was my concern with respect to anything has as a council being asked to work with contracts and vendors but we had the contract that just came request Ann and the questions on the timing matters. So, Rodney, if you or sin focus I can't could speak to this .. Good morning, mayor, sin focus I can't, economic development department, as mentioned before, council and staff will be

[10:49:42 AM]

bringing back the mega contracts as part of the equitable funding formula. As part of the report, we would be giving council option Ms. Terms of an equitable process. Aiba was identified on the nonequity side and so the contracts that we are bringing will be specifically brought for the minority chambers, the black chamber, the Asian, hispanic and the lgbt, and at that time they were given options that council could -- if we wanted to, fund other chambers, but there are, they are recommendations that council would definitely need to approve as we move forward. Sylnovia .. But the aiba contract did end in August, there were no additional options. It ended and we had pivoted those funds as previously

[10:50:42 AM]

mentioned for small business needs assessment given our current covid environment. It is something we do approximately every three or four or five years but given current environment when we come out of covid we will be able to provide the services.

>> Mayor Adler: What is a small business need assessment.

>> That is where we engage our small business community to find out what they are seeing, what their needs are, whether it is around training, whether it is around funding and it is something as again we mentioned we do every five years and adjust our programming. So it could be more classes, it could be more capacity building, et cetera. And given our current, as mentioned our current covid environment, our small businesses are definitely suffering and this will give us an opportunity to bring forth new programmatic areas.

>> Mayor Adler: Okay. Ann.

[10:51:44 AM]

>> Kitchen: Thank you for the explanation. I am reading from page 22 of the file, last fall with your recommendations. And with regard to aiba, there were two recommendations for aiba that could be built into this contract that we are proposing. The first one is to prioritize iaba's district developments. There are a number of these districts that are located in east Austin now, and by ending the contract that was -- that support was taken away -- in the districts. The second thing is -- to collaborate with the Mecca chambers to ex-fanned local resource academy, to address specific issues that the constituents, so continuing to contract -- [indiscernible] -- and mayor I hear your concern about, as we normally don't name entities to contract with.

[10:52:44 AM]

An exception is our chambers. We have as a council specifically said that we wanted all of our chambers, all of those members to be funded and that's why we -- that's the purpose behind this memo. So aiba is handled differently now and leaving the ibiz districts without support for September, October, now, it is -- it just doesn't align with previous council action, it doesn't align with the staff's recommendation.

>> Mayor Adler: Kathie.

>> Tovo: Yes. I just wanted to add my support for this resolution. You know, I know we had this conversation from time to time about whether the council is being more directive or less and I would say we apply it into --

[10:53:48 AM]

and this seems to me to be an example where it is supportable, you know, aiba is a trusted partner for many of our small businesses. In my mind it is really important that we do everything we can to support the organizations we have been working with who work with small businesses in our community, so

absolutely I support continuing to work with our minority chambers. But I also want to see us continue to work with the aiba, at a time when so many of our small businesses are struggling, I believe that we should be maintaining those strong relationships with those organizations that have constituents within them, rather than -- [indiscernible] -- So I will just leave it there, but again, I share the concern.

[10:54:54 AM]

-- So -- [indiscernible] -- I hope we can look at other options. And I have some ideas. In fact, the idea I raised several meetings ago to not move forward with the marketing contract for \$700,000 of appropriations forgive away items, that never came back to us so I am not sure what the result of that is, but I know that -- several different departments outside of the enterprise funds had within their budgets for this year some ability to purchase those kind of items, if we didn't ever take up that contract again which I guess maybe we won't be. So I think there is money within

-- within our budget, even during these tough times -- as

[10:55:58 AM]

well as continue with our contract with the aiba.

>> My not visible hand is raised. I can't see other folks so.

>> Mayor Adler: One second and I will recognize -- does it make sense to tied over this organization until we have the more global conversation in December so there is a context for it without an interruption in service if it is something we chose to continue?

>> And I don't know if anybody

-- I just kind of throw this out here at this point. I O? I O pioo, Pio, just exactly what is this Austin business alliance actually doing with these small businesses in east Austin?

>> So as part of the current contract, it is for marketing of

[10:57:00 AM]

their ibiz district, seven of their ibiz districts.

>> So it is just like an advertisement, marketing type program or is it -- what -- how actually are they helping the small businesses?

>> Yes. It is for the various districts that are around the city .. And it is for marketing businesses within the district as part of their membership. And is that a very critical business right now on the -- we have do market these small businesses? And how do they market it? Is it just a magazine or something like that?

>> There there is a magazine that is printed annually as are other items. I would have to pull the contract to get more details.

>> Renteria: I would like to wait until December and see how

[10:58:02 AM]

we could, you know, get this in here. I mean -- at this time that we are facing this very -- this pandemic and everybody is very

-- I don't know if that is a good way to -- to use our funding, so I need to really look into this for me to be able to support it right now.

>> Mayor Adler: Natasha. >>.

>> Harper-madison: Thank you. I think my colleague might have said essentially what I was going to say otherwise. And I really appreciate that sylvia introduced to the conversation the considerations around equity. That was one of the reasons that I wanted to be a part of this dialogue and this resolution was to really sort of talk through the fact that, yes, if and when

[10:59:02 AM]

we historically have a situation that we've adhered to, that we recognize could be better, and so I was hoping very much to make certain that the process is better as we are growing and involving as a municipality we get the opportunity, which is fantastic, to get better at how we do things. So I think that much like councilmember Renteria's introduction to the conversation, like a little more time to talk through exactly how we get this right is exactly what I would ask for as well.

>> And I believe we are making rounds with each council office prior to bringing the Mecca counties back and we will be reviewing the entire report.

>> Harper-madison: And I think I got a pretty comprehensive response, sylvia, about -- because my question was how does and does this, rather, affect the programming around soli

[11:00:04 AM]

Austin. I think a lot of folks know in large part my introduction to council was working with the soli department and advocating for merchants in that 12th street corridor. And they worked really hard and continue to work really hard to advocate for the merchants in that corridor and manor road and some of the others that I know personally. So just wanting to make sure that we didn't somehow inadvertently step on any efforts. But it sounds to me like that's not the case. But I also want to make certain that if we're going to move forward with -- I find it -- personally I find it a little bit odd that this contract expired in August and that we're just now taking it into consideration. And I see -- I sort of wonder -- maybe this isn't a question that you can answer here, but I just sort of wonder how we even got to a

[11:01:05 AM]

place where we had a contract that expired in August, but we're only having this conversation as we approach November. How did that even happen? But that to say, I think councilmember Renteria is right on the money. We need a little more time to talk through exactly what's transpired here and what we need to do moving forward.

>> Mayor Adler: Mayor pro tem?

>> Garza: I'm sorry if staff addressed this. So the amount of 55,000 is -- I'm sorry if somebody already asked this. A little distracted this morning. Do we know what that cost covers? Is it like actual like social media digital ads for advertisement or more like salary for the support staff that does the work, so to

[11:02:05 AM]

Speak?

>> Thank you, mayor pro tem. The contractually covers designing, advertisement and promotional material for each district, placing advertisement in selected venues in the ibiz behalf, managing the distribution of promotional materials. Identifying and promoting sponsors to promote the ibiz district free or at a reduced cost. Promoting the ibiz district in participating through social media such as Facebook and Twitter. Coordinating special events that promote the districts and creating a multi-page full color brochure that promotes the ibiz district as a single document.

>> Garza: And can you quickly remind us the location of -- you said six districts, right?

>> Seven.

[11:03:08 AM]

So manor road, Cesar Chavez, burnet road and --

>> Garza: Sorry, I didn't mean to put you on the spot. I thought I had it in front of you.

>> I do now. East Cesar Chavez, north drag, the east end, north loop, south first, east sixth and low burn, which is the burnet road area.

>> Garza: Okay. I don't know where I am on this. I appreciate this discussion. I know that in participating with Ms. Holt-rabb in the equity and economic development and the need to invest in helping small businesses in an equitable way so I am particularly interested in understanding how equity played a part in the decision to provide this contract. And I feel like I would lean more on the temporary extension as opposed to a

[11:04:08 AM]

year long, but I'm still thinking and I thank you for providing that information.

>> No problem.

>> Mayor Adler: Councilmember Casar?

>> Casar:

>> I had to step out, so if I missed it, I apologize, but apart from naming an organization, which we should shy away from, usually we haven't had an% item on to renew a contract that was not renewed by the staff. Is there a reason why the contract wasn't renewed? Is it because we're looking at the chamber funding stuff and that's why you held it off? Were there [indiscernible] That weren't met? Is there a higher priority? Is there a reason it was not extended that we should know about?

>> If I could start, councilmember, then I'll turn it over to interim director holt-rabb.

[11:05:08 AM]

So last year as you know, when the staff looked at programming budget for the next fiscal year, this contract had clearly been distinguished as expiring in August. And staff had decided that it was needed for those funds, it's a needs assessment study. So the budget funding wasn't reduced for next year, rather it's been programmed for needs assessment study for the purposes that interim director holt-rabb has outlined. The difficulty here of course is now that the money is allocated for a needs assessment study we would have to and we don't currently see any, we don't have any funding identified for this contract or for extending the contract K and so the contract has expired T expired in August. We do have programmed in budget for that money to be used for the needs assessment study. We don't have any money

[11:06:08 AM]

targeted for extending this contract.

>> Casar: And when you say is target the as needs assessment study is it because it's unclear whether it is the priority need based on your other budget items? Is it that there were metrics that needed to be met and you found something? I'm trying to understand because not many contracts you continue to extend them without a needs assessment study so I guess I want to better understand why it is that -- one way or the other it's fine one way or the other why, I just want to understand why it was flagged that way.

>> Absolutely. And I'll begin to of course turn it over to interim director holt-rabb should she want to add to this. Staff looks at the whole small business programs, and what they've identified was that with the amount of funding keeping the budget the same, not asking for any additional dollars that, the programming money for this

[11:07:09 AM]

particular need could be better served for a needs assessment study. As interim director holt-rabb had mentioned, we do that every five years. That helps guide how our small business program should be developed, what we should target, the areas that we should work in. It is unfortunate. We do support Austin independent business alliance 100%, we like the work that they do. As with other things when we hold the budget steady and we don't request an increase in funding yet we have to be things that need to be funded, we have to make a budgetary decision that was in front of us right now. So that's where we're at is the contract did expire in August. The funding was kept intact, but from a staff perspective we reprioritized it for a needs assessment study.

>> Thank you T Rodney. Exactly.

[11:08:20 AM]

>> Mayor Adler: Ann?

>> Kitchen: So I wanted to respond, councilmember harper-madison had raised a question about why this resolution is just now coming to us when it expired at the end of August. All I can say is that I recently became aware of it APD have tried to will understand what was happening APD it just took me a little -- and it just took me a little time to bring it forward. I would also say that acm Gonzalez, I'm not aware of any conversation as part of our budget process that was brought to to our attention that the abia contract was not going to be renewed and we would no longer be supporting that chamber although we support all of the other chambers. Nor was there any recommendation brought forward about how to address

[11:09:24 AM]

the -- address support for abia and our small businesses during the -- right now during an interim period or into the future. So what we've got is we've got a recommendation from staff, from last October. I read it as continuing abia funding, and but all means the ibiz business development and census tracks with low income household and a number of them are in low income districts. So the action was not brought to our attention as a council to understand that it was staff's intention not to fund abia any longer and not to follow the recommendations in the memo that was given to us in October. So that's what I'm not understanding now. I don't have any concern

[11:10:25 AM]

about if staff wants to proceed with a small business assessment, that's fine. I don't see any concern with that, but in the meantime we've left abia without a contract, without a path that I'm aware of to a contract who have left the ibiz district support that we were providing to them without a path forward. I hear my colleagues saying that they want more conversation, which makes sense to me too to have conversation, that's what was set up in the October memo, but in the meantime got a number of months for a chamber that supports our small businesses if we're leaving without support at a time when we're talking about the needs of our small businesses. So there's just a disconnect to me of why we're in the place that we are right now and I don't understand what the issue would be about

[11:11:26 AM]

continuing their contract whether it's for a year or for a shorter period of time. I'm not understanding what the concern is and how we got into this situation in the first place.

>> Mayor Adler: Mayor pro tem?

>> Garza: I'm asking questions just to understand the context of the issue and I appreciate the background and stuff. Were they made aware -- did they know that their contract was about to expire and that decisions were being made during budget over that?

>> Mayor pro tem, we sent a letter on August 19th indicating the contract was ending and we were not going to be renewing.

>> Garza: Did they respond to that letter?

>> We had a meeting with

[11:12:27 AM]

them. I'd have to look back on the date. But we followed up and had a meeting that we would not be renewing and that we would be pivoting to the needs assessment.

>> Garza: Okay, thank you. I appreciate that information.

>> No problem.

>> Mayor Adler: Ann?

>> Kitchen: I would suggest if folks have questions about the sequence that you reach out to abia. Their understanding of the sequence is different. If you notice on August 19th that their contract would expire on August 31st, a couple of weeks later, and which I would suggest is not time for us to understand what the path forward was for them or the path forward for this district.

[11:13:33 AM]

>> Mayor Adler: Okay.

>> Harper-madison: Mayor Adler, you can't see me, but my hand is raised. To offer clarity to my colleague who offered me to be part of this process, which I really appreciate. I think it's an important conversation. Just to Claire, I wasn't -- there was no implication of a lack of timeliness on your part. I just am curious about how by way of the process we found ourselves in this situation where the county lapsed, there's a recommendation from staff. I think we can all acknowledge a general lack of information by way of our colleagues on the council. And so I appreciate that you offered me opportunity to be a part of this process. I just do think we should have more dialogue around how we got here. Like how is it possible that by way of our processes we were able to reach a place where you had to introduce an ifc for an expired contract for something that is -- which I can absolutely agree is important the

[11:14:35 AM]

dialogue around small business advocacy. So I just -- I think much like our other colleagues would just like to have the opportunity to have more dialogue and get more information and understand how [indiscernible]. Certainly there's no criticism, just so you understand that.

>> Kitchen: Yes, thank you. And I understood it that way, thank you.

>> Mayor Adler: Colleagues, any further discussion on this pulled item 43? Councilmember alter and then councilmember Renteria.

>> Alter: I thought you said we were going to be getting briefings on the meca chamber one. I really appreciate that and appreciate the issues that arose when those changes were first proposed, which

were kind of dramatic in terms of my perspective on what we were doing at that time. And the way that we were approaching it given that

[11:15:35 AM]

our goal is to be supporting the small businesses and having the most effective response that we can. So I'm really hoping that you are able to take the feedback that we've provided and incorporate that so that we are looking at effectiveness as part of the criteria as well.

>> Yes. We took into consideration all the feedback at the time of the approval of the one year for the meca chambers and again we'll be making rounds to be sure that we heard and incorporated all of the concerns.

>> Alter: Thank you.

>> Renteria: Mayor, I would also like the staff to come back and give us information on what other type of organizations or groups doing these kind of support structures. I know we got soli Austin here and they also provide

[11:16:36 AM]

support to the business district. So I would really like to find out what all these groups are doing. I know the business journal advertises all new business and all businesses that are going out of business, all the restaurants and bars that's going to open up and ones that are going to close. So if we could get all that information because I know there's a lot of advertisement going out there and support. I'm just wondering if we're not just replicateing and duplicating services.

>> Mayor, I'm not sure if you're speaking, but you're on mute.

>> Mayor Adler: Yeah, I was speaking for quite awhile. Great stuff that y'all missed. I think that ws the last pulled item that we had,

[11:17:36 AM]

staff. Thanks for being with us on this item number 43. I don't think we have any other pulled items, which would have us then going to executive session. To take up two items pursuant to it 551.071 of the government code council is going to cuss legal matters related to items E 2, which is Reagan national advertising. And item 31, which is the ordinance amending code to amend the north burnet gateway regulating plan. E 1 has been withdrawn. Without objection here at 11:18, we'll go into executive session and I think at the end of executive session only I'll be needed to come back into this channel in

order to close the work session. Colleagues, it's 11:18. I'll give everybody five minutes to have a bathroom break if they want it and at

[11:18:39 AM]

11:25 we'll go ahead and reconvene in executive session. See you there.

[In Executive Session]

[12:51:21 PM]

>>Mayor: We are out of closed session. In closed session we discussed legal matters related to items: E2 and Item: 31 Also I want to just note that item: 40 the Kemp case is withdrawn and therefore won't be considered by the body at the meeting. So don't anticipate any speakers, speaking on that item. The ability to be able to speak on that item is before, during the bodies in consideration of the item and it has been withdrawn. With that here at 12:51 p.m. this Council meeting is ahh...before we do that I want to mention apparently there is some scam artists that are out in the City that are calling people up reporting to be from Austin Energy telling them they owe Austin Energy money to meet them at the 7-Eleven or somewhere else. To get some cash

from them. I want to let everyone know it's a scam. Austin Energy does not call people or threaten them cutting off their power or do they offer to collect money from people so it's not something that Austin Energy does that way. So if you get a call like that to please know it is a scam and if there are any questions at all you can always call Austin Energy and with that 12:52 p.m. this meeting is adjourned.